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Substitute for Form 1449/PTO	Complete if Known	
	Application Number	10/572,655
INFORMATION DISCLOSURE	Filing Date	March 6, 2007
STATEMENT BY APPLICANT	First Named Inventor	Dominik EISERT
(Use as many sheets as necessary)	Art Unit	2811
(======================================	Examiner Name	LAM, Cathy N.
Sheet 1 of 1	Attorney Docket Number	5367-223PUS

				NT DOCUMENTS	
Examiner Initials*	Cite No. 1	Document Number Number-Kind-Code ^{2 (if known)}	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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Examiner	Cite	Foreign Patent Document	Publication Date	ATENT DOCUMENTS Name of Patentee or	Pages, Columns, Lines,	T ⁶
Initials*	No. 1	Country Code ³ Number ⁴ Kind-Code ⁵ (if known)	MM-DD-YYYY	Applicant of Cited Document	Where Relevant Passages or Relevant Figures Appear	
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1	Examiner Signature	/Cathy Lam/	Date Considered	06/22/2010

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